Texas Commission on Environmental Quality

Annual Operational Status Report Year: 2024

Site Information (Regulated Entity)

Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN103859674
What is the name of the Regulated Entity (RE)?	FOSTER 1 SECTION 5 SATELLITE BATTERY
Does the RE site have a physical address?	No
Physical Address	
Because there is no physical address, describe how to locate this site:	AT INTX OF EXIT 194A AND I 20 APPROX 17 MI E OF BIG SPRING TURN RIGHT ONT E HOWARD FIELD RD GO S FOR 0.8 MI TO CHEVRON OFFICE SIGN TURN LEFT AND FOLLOW LEASE RD 2.8 MI TURN LEFT AND FOLLOW LEASE RD 2.8 MI TURN LEFT AND GO 0.4 MI TO SITE
City	COAHOMA
State	TX
ZIP	79511
County	MITCHELL
Latitude (N) (##.#####)	32.3005
Longitude (W) (-###.#####)	-101.163
Facility NAICS Code	211111
What is the primary business of this entity?	OIL AND GAS PRODUCTION

Section 1# Authorization Information

AUTH#: 1

Authorization Number, Site Name, Authorization	56041 FOSTER 1 SECTION 5 SATTELITE
Туре	BATTERY PBR

Customer Information

How is this applicant associated with this site?	Multiple
What is the applicant's Customer Number (CN)?	CN605423953
Type of Customer	Corporation
Full legal name of the applicant:	
Legal Name	Sabinal Energy Operating, LLC
Texas SOS Filing Number	802767531
Federal Tax ID	
State Franchise Tax ID	32064307989
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	21-100
Independently Owned and Operated?	Yes

Responsible Official Contact

Person TCEQ should contact for questions about this application:

Organization Name Sabinal Energy Operating LLC Prefix MR First Kyle Middle Sanders Last Sanders Suffix Sanders Credentials Title Enter new address or copy one from list: EHS Manager Mailing Address Domestic Mailing Address (include Suite or Bldg. here, if applicable) 1780 HUGHES LANDING BLVD STE 1200 Routing (such as Mail Code, Dept., or Attn:) THE WOODLANDS State TX ZIP 77380 Phone (###-###) 3462249300 Extension Alternate Phone (###-###) Fax (###-###-####) Fax (###-###-####)		
Prefix MR First Kyle Middle Sanders Last Sanders Suffix Sanders Credentials Title Enter new address or copy one from list: EHS Manager Mailing Address Domestic Mailing Address (include Suite or Bldg. here, if applicable) 1780 HUGHES LANDING BLVD STE 1200 Routing (such as Mail Code, Dept., or Attn:) THE WOODLANDS State TX ZIP 77380 Phone (###-###) 3462249300 Extension Alternate Phone (###-###) Fax (###-###-###) Fax (###-####)	Same as another contact?	
First Kyle Middle Sanders Suffix Sanders Credentials Title Enter new address or copy one from list: EHS Manager Mailing Address Domestic Mailing Address (include Suite or Bldg. here, if applicable) 1780 HUGHES LANDING BLVD STE 1200 Routing (such as Mail Code, Dept., or Attn:) THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) 3462249300 Extension Alternate Phone (###-###-####) Fax (###-###-####) Fax (###-###-######)	Organization Name	Sabinal Energy Operating LLC
Middle Last Sanders Suffix Credentials Title EHS Manager Enter new address or copy one from list: Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) Extension Alternate Phone (###-#####) Fax (###-#####) Fax (###-#######)	Prefix	MR
Last Suffix Credentials Title EHS Manager Enter new address or copy one from list: Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) Extension Alternate Phone (###-#####) Fax (###-######) Fax (###-#################################	First	Kyle
Suffix Credentials EHS Manager Title EHS Manager Enter new address or copy one from list: Mailing Address Mailing Address Domestic Mailing Address (include Suite or Bldg. here, if applicable) 1780 HUGHES LANDING BLVD STE 1200 Routing (such as Mail Code, Dept., or Attn:) THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) 3462249300 Extension Alternate Phone (###-###-####) Fax (###-###-####)	Middle	
Credentials Title EHS Manager Enter new address or copy one from list: Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) Extension Alternate Phone (###-###-####) Fax (###-#####)	Last	Sanders
Title EHS Manager Enter new address or copy one from list: Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) EHS Manager Domestic 1780 HUGHES LANDING BLVD STE 1200 THE WOODLANDS TX Address (###-###-####) Fax (###-###-####) TX THE WOODLANDS TX TX TY TR TR TR TR TR TR TR TR TR	Suffix	
Enter new address or copy one from list: Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) Extension Alternate Phone (###-###-####) Fax (###-####)	Credentials	
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Address Type Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (###-###-####) Extension Alternate Phone (###-#####) Fax (###-####)	Enter new address or copy one from list:	
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applicable) Routing (such as Mail Code, Dept., or Attn:) City THE WOODLANDS State TX ZIP 77380 Phone (##-###-####) 3462249300 Extension Alternate Phone (###-####) Fax (###-###-####)	Address Type	Domestic
City THE WOODLANDS State TX ZIP 77380 Phone (###-####) 3462249300 Extension Alternate Phone (###-###-####) Fax (###-###-####)	Mailing Address (include Suite or Bldg. here, if applicable)	1780 HUGHES LANDING BLVD STE 1200
State TX ZIP 77380 Phone (###-###) 3462249300 Extension Alternate Phone (###-###+#) Fax (###-###-####) Fax (###-#####)	Routing (such as Mail Code, Dept., or Attn:)	
ZIP 77380 Phone (###-####) 3462249300 Extension Alternate Phone (###-###-####) Fax (###-###-####) Fax (###-#####)	City	THE WOODLANDS
Phone (###-###-###) Steinsion Alternate Phone (###-###) Fax (###-###-###)	State	TX
Extension Alternate Phone (###-###-) Fax (###-###-)	ZIP	77380
Alternate Phone (###-###-) Fax (###-###-)	Phone (###-####)	3462249300
Fax (###-###-###)	Extension	
	Alternate Phone (###-###)	
E-mail kyles@sabinalenergy.com	Fax (###-###)	
	E-mail	kyles@sabinalenergy.com

Section 1# Operational Status

Permit#: 1

1) Permit Number	56041
2) Is the permitted activity operational?	Yes

Certification

The electronic signature below indicates that the Responsible Official has knowledge of the facts herein set forth and that the same are true, accurate, and complete to the best of my knowledge and belief.

- 1. I am Kyle M Sanders, the owner of the STEERS account ER028015.
- 2. I have the authority to sign this data on behalf of the applicant named above.
- 3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
- 4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
- 5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
- 6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
- 7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
- 8. I am knowingly and intentionally signing Annual Operational Status Report Year: 2024.
- 9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

MULTIPLE Signature: Kyle M Sanders MULTIPLE

Customer Number: CN605423953

Legal Name: Sabinal Energy Operating, LLC

Account Number: ER028015
Signature IP Address: 216.215.100.20
Signature Date: 2024-12-31

Signature Hash: 88E085C655707D4E52D6E7CE85B0BB26CE8E151

5F5C1B790B46975C8178A25C6

Form Hash Code at time of Signature: A05384B4BE3A9AF98621787737BD5AC221A266E

DA3852C43303C8D6CDBD99699

Submission

Reference Number:	The application reference number is 740675
Submitted by:	The application was submitted by ER028015/Kyle M Sanders
Submitted Timestamp:	The application was submitted on 2025-04-14 at 15:39:17 CDT
Submitted From:	The application was submitted from IP address 74.51.197.18
Confirmation Number:	The confirmation number is 646175
Steers Version:	The STEERS version is 6.89

Additional Information

Application Creator: This account was created by Kyle M Sanders